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| SMITHKLINE CORPORATE I P. O. BOX 1539 | Sta | I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. | | | | | |
| KING OF PRUS | SIA, PA 19406-09 | Š | Šậŋdra Manton (Deposit | | | (Depositor's name) | |
| | | | Sancra Marton | | | (Signature) | |
| | | . 6 | 9 January 2009 | | | (Date) | |
| APPLICATION NO. | PLICATION NO. FILING DATE | | FIRST NAMED INVENTOR | | ATTORNEY DOCKET NO. | | CONFIRMATION NO. |
| 10/540,371 02/21/2006 | | | David George Allen | Allen P33153 | | | 3499 |
| TITLE OF INVENTION: PYRAZOLO [3,4-B] PYRIDINE COMPOUNDS, AND THEIR USE AS PHOSPHODIESTERASE INHIBITORS | | | | | | | |
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| APPLN. TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID ISSU | E FEE | TOTAL FEE(S) DUE | DATE DUE |
| nonprovisional | NO | \$1510 | \$300 | \$0 | | \$1810 | 02/03/2009 |
| EXAMINER ART UNIT | | | CLASS-SUBCLASS | | | | |
| RAHMANI, NILOOFAR 1625 | | | 514-303000 | | | | |
| 1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list CER 1.363) James M. Kanagy | | | | | | | . Kanagy |
| CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form | | | or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 2 Stephen Venetianer Charles M. Kinzig | | | | |
| | | | | | | | |
| PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. | | | | | | | M. Kinzig |
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| (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) | | | | | | | |
| Glaxo Group Limited Greenford, Middlesex, United Kingdom | | | | | | | dom |
| Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🖾 Corporation or other private group entity 🚨 Government | | | | | | | |
| 4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) | | | | | | | |
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| 1 JAMIA K 6 1 6094 | | | | | | | |
| Authorized Signature | Tana Maria | 1)100010 | | | | | |
| Typed or printed nam | · · | anagy | | Registration I | | 9,550 | |
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